EXECUTIVE LOBBYING FORM		E REPORT	Prants va	58 Mayin Deplination (is.
COVERENG JANUARY 1 - JUNE 2	30, DUR AUGU	ST 15		
COVERING JANUARY 1 - DECEM	18ER 91,2006 - DUE 1	FEBRUARY 15		FOR OFFICE USE ONLY Postmark Date: 2 13 6
Mail to: the Board of Ethics, 2415 Quail Dr OR	., 3rd Floor, Baton Roug	ge, LA 70808		era-alis
<u>Fax to:</u> (225)763-8787 or (225)763-8780				
1. Name Cernich	William Di		A	3072627
2. Business Address: 7854 Off	ice tark Blu	<u>d Ka</u> rti	in Kouse La	70809
Street and No. Mailing Address <u>SAME</u>	a	ry 9	tate ZIp	, 55.7
Mailing Address 3731116	· · · · · · · · · · · · · · · · · · ·			
	and Telephone Number			
4. Total of all executive libblying expend (Include expenditures from Schedules A	litures made January 1 th and 6)	ուսացի (առ. 30։	s	
 Total of all executive lobbying expend (When Applicable) (Include expenditu 			: \$ 6 /	
 Total of all executive lobbying expensions: Using 4 added to Line 5 about equal Line 	fitures made during cale: : 6)	ndar year:	\$Ø	·
7. Did you make an expenditure exceedi	ng \$50 on one occasion !	br an executive f	ranch official:	;
From January 1 through June 20? From July 1 through December 31?	Yсь	No No	[X] [y] NA []
If the answer to either question in Nu	unber 7 above is YES, co	mplete Schedule	A and attach.	
8. Did you make expenditures exceeding	; the sum of \$250 for an a	executive branch	official:	
From January 1 through June 30? From July 1 through December 31?	Yes 🔲	No No		1
If the answer to either question in Nu	mber 8 above is YES, cor	nplete Schedule A	A and areach.	
 Did you expend funds for any reception officials were invited during this report 	n, social gathering, or or rting period?	ber function to v	which more than two	nty-five executive branch
	Yes 🗌	No Ø		
If the answer to Number 9 above is YF	S. complete Schedule B	and attach.		
		2	HAND	DELIVERED
Fixm 507, Rev. 7/04	Page	1 of <u>3</u>		ニーというしへにひ

EXECUTIVE LOBBYING EXPENDITURE REPORT



10. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule: (b) the eggregate total of all expenditures attributable to the department made during the January 1 - June 30 reporting period: (c) the aggregate smal of all expenditures surfluinable to the department meda during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year autibutable to the department. a. Name of Department _____ N b. Total of all expenditures made January 1 through June 30: _____ Total of all expenditures made July 1 through December 31; (When applicable) d. Total of all expenditures made during the calendar year: N)A a. Name of Department: b. Total of all expenditures made January 1 through June 30: a. Total of all expanditures made fully 1 through December 31; (When applicable) 4 Total of all expenditures made during the calendar year: a. Name of Department: b. Total of all expenditures made January 1 through June 30; c. Total of all expenditures made July 1 through December 31: (When applicable) d. Total of all expanditures made during the calendar year. 11. PROVIDE BELOW (a) the name of the executive branch department and the individual agency as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the agency made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the agency made during the July I - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year amplituable to the agency. a. Name of Department and Individual Agency: b. Total of all expenditures made January 1 through June 30: c. Total of all expenditures made July 1 through December 31: (When applicable) d. Total of all expenditures made during the calendar year:

2)	a. Name of Department and Individual Agency:	NA
	b. Total of all expenditures made January 1 through June 30:	ş
	 c. Total of all expenditures made July 1 through December 31: (When applicable) 	3
	d. Total of all expenditures toods during the calendar year:	\$
9)	s. Name of Department and Individual Agency:	Α
	b. Total of all expenditures made Japonary 1 through June 30:	5
	 Total of all expenditures made July 1 through December 31; (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	\$

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist